Characterizing the Community Health Information Infrastructure

Tiffany Veinot, University of Michigan (tveinot@umich.edu)

Project Description:

Rationale. Health information is a critical resource for individuals and communities, but some groups of people experience reduced access to this information. Inequitable access to health information may be linked to several community-level factors, including: local quality of Internet access; the social distribution of health expertise; and the resourcing of information dissemination channels. Notably, communities with less access to health information often experience health disparities. Yet little is known about the role that information exchange dynamics and infrastructures may play in community-level access to health information.

Academic Objectives. This project focuses on answering the questions: “How do residents of low-income communities acquire, share, and use health information? What do they see as community assets and barriers to their ability to do so?” and “What community organizations play a role in health information production, acquisition, and sharing and use in low-income communities?” To answer these questions, this project will draw from data collected as part of a project conducted in three high-poverty communities in Michigan: Flint, Inkster, and Northwest Detroit. The data set includes qualitative interviews conducted with 71 patients with diabetes, hypertension or kidney disease; and 12 focus groups conducted with 99 health care providers, service providers, and community leaders.

Since data are already collected, this project will focus specifically on data analysis and interpretation, synthesis of existing literature, and scholarly writing. A goal of the project will be to contribute to theoretical insights regarding the community health information infrastructures that impede, or enable, access to health information. These theoretical contributions will provide a basis for the future design of information technologies and services to better support people with chronic diseases in low-income communities.

Student Participation:

The student trainee will serve as a research assistant for the project. In this role, I will mentor them in the process of scholarly writing, from literature review to data analysis to writing and revision. Accordingly, they will: 1) synthesize literature in an area of research; 2) categorize and code interview data using a mixture of analytical approaches; and 3) prepare a manuscript that addresses the research questions.

Contribution to Student Academic and Professional Development. The student will gain experience with organizing, analyzing, and presenting qualitative data. They will gain skill in discerning the quantity and type of qualitative data that is required to produce a publishable journal article in the field of health information science. They will have the opportunity to learn how to position research questions in the context of published literature, how to describe and report research methods, how to report results, and how to reflect upon the implications of reported research. They will also learn how to prepare publication-quality manuscripts.

Mentoring Plan:
I will meet with the student on a weekly basis throughout the project. Additionally, we will work together more closely as we begin each new phase of the study. I will provide instruction in data analysis methods, and I will provide feedback on coding, memos and other results of analysis. I will also instruct the student in writing for a scholarly audience, and provide detailed feedback on manuscript drafts first prepared by the student.